

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS  
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of  
**JOSE ANDRES CAZARES, et al.,**

Case Number: **13-cv-05626**

**v.  
CITY OF CHICAGO, et al.**

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

**CITY OF CHICAGO**

NAME (Type or print) <b>Katherine C. Morrison</b>	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) <b>s/ Katherine C. Morrison</b>	
FIRM <b>Dykema Gossett PLLC</b>	
STREET ADDRESS <b>10 S. Wacker Drive, Suite 2300</b>	
CITY/STATE/ZIP <b>Chicago, IL 60606</b>	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) <b>6309729</b>	TELEPHONE NUMBER <b>(312) 876-1700</b>
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	

**CERTIFICATE OF SERVICE**

I hereby certify that on **December 1, 2016**, I caused the foregoing to be filed and served on all parties by the Court's CM/ECF electronic filing system.

s/ Katherine C. Morrison

---